

**NEVADA DEPARTMENT OF CORRECTIONS  
ADMINISTRATIVE REGULATION  
105**

**DEVELOPMENT OF INSTITUTIONAL OPERATIONAL  
PROCEDURES**

**Supersedes:** AR 105 (Temporary, 06/21/10)

**Effective date:** 08/13/10

**AUTHORITY:** NRS 209.131

**RESPONSIBILITY**

All Wardens are responsible for developing Institutional Operational Procedures to implement Administrative Regulations specific to their institution/division.

**105.01 DEVELOPMENT OF INSTITUTIONAL OPERATIONAL  
PROCEDURES**

1. The Warden will assign a staff person to:
  - A. Properly maintain the master copy of all Institutional Operational Procedures;
  - B. Disseminate the Institutional Operational Procedures to staff.
2. The Warden shall ensure that all Institutional Operational Procedures are reviewed annually and updated as needed.
3. All Institutional Operational Procedures will be prepared using the following format:
  - A. HEADINGS – Headings will reflect the Department’s title rather than the facility institution located (i.e. Health Care Operational Procedures).
  - B. NUMBER and TITLE
  - C. AUTHORITY– List the Administrative Regulations number used as a reference, ACA standard, other. Do not use another institutional operational procedure as a reference.
  - D. RESPONSIBILITY – Specify which staff positions are responsible for the operation of the plan and in what manner.

E. METHODS: – List the operational details which enable the institution/division to meet the purpose and objectives of this plan.

F. RESCISSION – List any procedures that are amended or superseded by the specific institutional procedure.

G. Across the bottom of the sheets, include the name and number of the institutional procedure, page number, effective date of OP and name of institution/division.  
Example:

VISITING SCHEDULE

O.P. #8

JUNE 10, 2000

INSTITUTIONAL/ FACILITY NAME

4. On the last page of each institutional operational procedure, following the signatures, it shall be noted if the institutional operational procedure is inmate accessible, as determined by the Warden.

Example:

INMATE ACCESS

YES:

NO:

5. If an audit is required, audit questions should be attached. If not, “none” should be written on the audit page.

6. All institutional operational procedures require a final review and written approval of the Warden.

A. A memo can be written by the Warden to temporarily change an Institutional Operational Procedure.

B. All relevant Operational Procedures must be revised within 30 days of the date the memo was written.

C. Institutional Operational Procedures must be signed and dated by the Warden and the Associate Wardens.

D. In facilities that do not have an Associate Warden, Operational Procedures must be signed and dated by the Facility Manager or the Warden who supervises the facility.

E. All Operational Procedures must be reviewed and signed by the appropriate Deputy Director.

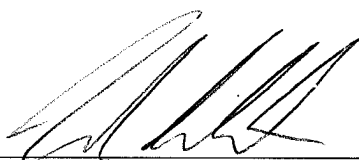
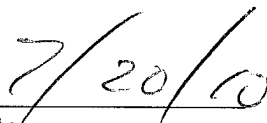
7. Institutional Operational Procedures, which currently do not conform with the above format, will be changed during the annual review process so that, within a year, all procedures shall conform with the above format.
8. Distribution of Institutional Operational Procedures
  - A. Institutional Operational Procedures will be disseminated to appropriate staff at the institution/facility.
    - (1) Institutional Operational Procedures will be made available to all staff.
    - (2) Institutional Operational Procedures will be made available to the public, except those procedures designated as "Confidential".
  - B. Copies of these Institutional Operational Procedures determined to be inmate accessible will be sent to the Inmate Law Library.
    - (1) Inmates found in possession of unauthorized Institutional Operational Procedures will be charged with Possession of Contraband.
    - (2) Any staff member allowing such access will also be subject to disciplinary action.
  - C. A copy of all Institutional Operational Procedures relating to Fiscal Management will be sent to the Deputy Director of Support Services.
  - D. Copies will be sent to the appropriate Deputy Director.
9. Institutional Operational Procedures should be developed and/or reviewed through staff meetings, suggestion programs, employee councils or similar formats.
10. Institutional Operational Procedures will not supersede Administrative Regulations.
  - A. If a conflict occurs, the Administrative Regulation is the controlling document and will be followed by staff
  - B. This restriction does not prevent institution/facilities from developing procedures with specifics unique to their institution/facility, in order to implement and comply with ARs.
11. Divisions, such as Support Services, Medical and Personnel will develop operating procedures to meet their specific standards. Formats may vary.

## **APPLICABILITY**

1. This AR requires an Institutional Operational Procedure.
2. This AR requires an audit.

## **REFERNCES:**

ACA Standards 4-4012; 4-4004

  
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Howard Skolnik, Director  
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Date